Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>07-14-2010</u>	Address:	CR 550W appr. 1/4 mile
Case #:	16-19828		south of Division Rd.
County;	<u>Tipton</u>		Tipton, IN
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
	onal Lab al/Glasswarc/Equipment (only) ite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open No Structure ☑ Other: side ditch
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): N/A			
Red Phosphorous/Iodine Reaction(s): N/A			
Flammable Solvents: side ditch			
☐ Water Reactive Metal (Lithium): <u>N/A</u>			
Anhydrous Ammonia: <u>N/A</u>			
☐ Hydrochloric Acid Gas Generator(s): N/A			
Corrosive Acid: side ditch			
Corrosive Base: <u>N/A</u>			
Other (item and location): N/A			
Yes No	er age 18 discovered (check one) (A (number present) port to Child Protective Services	☐ Ephedrin ☐ Retail/Mo	e Information c/Pseudoephedrine Tracking Log crehant Tip P investigation
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: <u>Tipton FD</u>	Fax: <u>(765) 6</u> 75-3500	
Health Department: Tipton HD		l'ax: (765) 6 <u>75-6952</u> l'ax: N/A	
Child Prote	ction Service: N/A		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Joshua Ma <u>ller</u> Phone <u>(765) 473-6666</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.